• FOR INSTRUCTIONS, SEE BACK OF FORM	
1. TIE SHOW OF FORM	FORM
DISCLOSURE SUMMARY PAGE	DR-2 (Rev. 01/98) DISCLOSURE REPORT
COMMITTEE NAME (Must be seen	For Office Use Only
Berry for Sown House of Rea	Comm. # 393
	Indexed 5
IMPORTANT: Indicate type of committee you are reporting to	Audited
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee	Computer
Maris A Densite	
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	R 11 700
TELEPHONE	ATE SIGNED
Routine Penalties Due For Late Filed Reports Range from S	\$20 to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	
I AM FILING A DANUARUL 19 -2008	
, LAM FILING A January 19, 2008 REPORT FOR AN/A (1) ELECTION	//2\NON =1 =0=10+
(repo∯t date)	ne Thom-ELECTION YEAR.
☐CHECK IF AMENDMENT TO REPORT DATED	
Local Co	ommittees, enter Date of Election
Check if this is final (termination)	
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)	Local Committees, enter County in
which are	ection is held
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the constitution in the second s	
of all monies held by the committee. This amount MUST be the	
same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.	5 1 1 - 2
or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD	_3/45.33
Schedule A: Cash Contributions total (Annual Contributions)	
Schedule A: Cash Contributions total (Attach Schedule A)	<u> 3710.00</u>
Machine (Milach Schedule F)	
- Jampaigh Floperty (Atlach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	
SUBTRACT TOTALS	6855.33
Schedule B: Expenditures total (Attach Schedule B)	1785 09
Schedule F: Loan Repayments total (Attach Schedule F)	1102.01
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	····
	2010.24
UNPAID BILLS (From Schedule D. Attach Saturday	•
UNPAID BILLS (From Schedule D - Attach Schedule D)	
Tom Schedule E - Affach Schedule E	A
- Mach Schedile F)	
CONSULTANT BREAKDOWN (Schedule G Attached?)	VC2
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	YESNO

For	Instructions,	See Back	of Form
rui	111311 46110113,	JEE Dack	01 1 01111

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t Form	SCHE
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DULE Α (Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF

AMENDING FORM

(Including candidate's personal funds)

CONTRIBUTIONS -- MONEY TAKEN IN

COMMITTEE	NAME	(Must be sar	ne as on Statem	ent of	Organization)	
Bostu	Las	Soura	House	B	Reo	

D STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST-OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

0.477	DAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF SOMETHING TON	TO CANDIDATE*	RECEIVED	FUND-
(MM/DD/YR)	AND PAC CHECK		(if applicable)		RAISER
	NUMBER		·		INCOME
	ID# 6027	Deere PAC Sowa #6027		s	
, , ,	01/11 05/2	666 Shand Ave suite 1707		*	
6/11/07	ck# 2553	Day maria 24 57319-2577		500,00	
$\varphi(I)(I)(I)$	10# 25Ad	Des Mornes, SA 50309-2507			
	1D# 3508 6020	Dona Lawpac			
	CK#3508	521 East Locust St., 3MH		100.00	
6/27/17		521 East Locust St., 3rdfl Des moines, JA 50309		100.00	
	ID# 6118	Down Optometric Association	L		
,	CK# A.	N DC -++-11/C	i	150 00	
6/27/07	CK# 2445	West Des Moines, JA 500	6	150.00	
1101	ID# 6021	1. 1'+union DAC	1		
1 , ,	_	Credit Union PAC			
7/16/07	CK# 002107	P.O. Box 10409 JA 50306		250.00	
1114101	ID# 6046		<u> </u>		
	" WV 40	Justice for All PAC			
1-1-1-	CK# 4323	2186th Ave, STE 526	1	100.00	L
7/25/07		Des moines, SA 5309-4091	1	100,00	
	ID#	Advance America Cosh Advance Center	Jue		
1 4 /	ck# 1584	135 N. Church St.		SEAAA	
7/25/07		Spartanbury SC 29306.		250.00	ļ
10-1V	ID# 6067	Shura I Year + Ly Dar # 6067			1
1 1	,	Sowa Health Pac #6067 6750 Westlown Parkway #/60	4		
8/18/07	ск# 3724	West Des Moines, DA 50266		200.00	
0/12/01	ID# Fire Pac	D. A. A. A.			
		Steve Ackerson			
10/1/2	CK# 3755	1634 NW 1315+3+.		100.00	
8/18/07		Eline JA 50326		100.0	
T 77.	ID#	International Awar. of Fire Fighters			
1 , ,	ск# 2329	1750 Newyork Ave, New		1 274 22	
10/3/07	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Washington DC 2006		1,000.00	
TIVE !	ID# 600H	Assoc. Len Contractor JIAPAC		1	
•		1001 FC		1	
11111111	CK# 4660	Des maines SA 50309		250.00	
10/11/10/1		I LE MYALMEN IN SUSUA	SUB-TOTAL		
				\$ 2900	<u> </u>
		TOTAL (if last page	e of this schedule)		
		, 5 (n	•	27/1	1

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

__ of __ <u>Q</u> (for Schedule A)

For	Instruct	ions	See	Rack	Ωf	Form
r Oi	11134146		ucc	Dack	v.	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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eset Fo	A 17877
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SCHEDULE (Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST-OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
(NUMBER				INCOME
	ID#	Bruce G. Rogers.		\$	
12/1/07	CK#	Bruce G. Rogers. 2100 Four winds Drive Cefar Falls, DA 50613		10.00	
	ID#	Kathy Ferguson		10.00	
12/11/07	CK#	1150 Columbus Dr. Watereso, DA		50.00	
	ID#	Gregorgy R. Schmitz		00,00	
12/11/67	CK#	32045 Willow Ave		5000	
	ID#	New Hartford It 50660 Barbara Lee Boaturight 2331 East 39th Court			
12/34/07	CK# 14227	Des moines, IA 50 317		50.00	
1	ID#	Brice Oakley			
12/24/07	CK# 2443	418-38th PL, Des moines, 24 30312		100.00	
12/24/07	ID# 6070 CK# 3564	Sown Lawpac # 6070 521 East Locust St., 3rd Fl			
12/24/07		Des Moines, & A 50309-1939		100.00	
	ID# C00199703	The Salto-SmithKline PAC			
ralvelei	CK# 13604	Five moore Drive Research Triangle Park NC27709		200.00	
1	ID#				
12/24/07	ск# 1879	Clo Shelly meighen (6-013-530) 111 High street, J 7 50392		250.00	
	ID#	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	CK#				
	ID#				
	CK#				
<u> </u>	1.		SUB-TOTAL	· CIN ND	

TOTAL (if last page of this schedule)

(for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF

	COMMITTEE	ENAME (Must be s	same as on Statement of Organization)		
	Berry	4 For Do	wa House of K	Res.	
	DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	2/15/07	CK# 1173	Payne A. M. E Church 10 94 mobile St Waterloo, DA 52703	Ad in founders Aniversary Booklet	s 115,00
	3 <i> 30 07</i>	CK# 1174	Postmaster 2181 Logen Ave Waterloo DA 03	Stamps	7.80
	3/30/07	CK# 11 75	Hyree Foods 2181 Logan Ave waterdor, DA 03	Copies of Schedule	3.21
	4/7/07	ID# CK# 1176	Strategic media 1111 W. San Marnan Dr Waterloo, SA 50704		159.60
	5/3/07	CK# 1178	KBBLI Radio Station 918 Newell St. Waterloo, Sp 50703	Anniversary Banquet	90.00
	5/3/07	ID# CK# //80	KBBIS Radio Station 918 Newell St, Waterloo, DA 50703	Add in 30th Anniversary Booklet	300.00
	6/11/07	ID# CK# _//8/	Deborah Berry 231 Madison St. Waterloo DA 50703	Reinbursed for Registrations membership for midwestern baining	200.00
	6/11/07	ID# CK# <i>1182</i>	Carter Frinting 1739 E. Grand Ave Des moines DA 50316	Birtinday Cards for Constituents	102.74
_				SUB-TOTAL	\$9.78,35
				TOTAL (if last page of this schedule)	\$

THIS BOX APPLIES TO CANDIDATES' CO	MMITTEES ONLY:
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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

	/		2
Page)t	_12

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
(Rev. 09/97)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) CANDIDATE NAME AND ADDRESS TO **PURPOSE** DATE ID NUMBER **AMOUNT** EXPENDITURE (DESCRIBE TRANSACTION) **EXPENDED** (if applicable) EXPENDED (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# CK# \$81.48 CK# 35.00 Cty Democrato CK# 1185 Constituer CK# 1186 ID# CK# 1187 250.86 CK# 1188 *239.40* ID# CK# ID# CK# SUB-TOTAL

TOTAL (if last page of this schedule)

\$06.14 \$1785.09

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

FOR INSTRI	ICTIONIC	CEEDACK	OF FOOL

OR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization)	E (Rev. 06/97)	IN KIND CONTRIBUTIONS
Berry For JA House of Rep.		(THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
4/7/07	House Truman Fund 5661 Fleur Orwe Des Moines, JA 50321		Invitations and stamps Invitations and stomps	\$ 25.08	
11/1/07	Des Moines, DA 50321 House Truman Fund 5661 Fleur Drives Des Moines, DA 50321		stomps	50.00	
			· · · · · · · · · · · · · · · · · · ·		
<u> </u>			SUB-TOTAL	\$ 75.00	
			TOTAL (if last page of this	\$	·

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of ______(for Schedule E)

schedule)